State of	
California Department of Consumer	
Affairs Affairs	
Building Quality	, [

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CONSUMER	COMPLAINT	<b>FORM</b>

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I wish to register a complaint against the contractor named below. I understand that the Contractors State License Board is unable to represent private citizens in court or to collect money or to levy fines.

If the contractor is licensed, he/she will be informed of this complaint in order to facilitate the resolution of this matter. If you wish your name to be kept confidential (i.e., employer/employee, unlicensed contractor, personal safety) please check this box and submit an explanation.

	TO HELP	THE CSLB RESC	LVE T			MANY QUESTIONS		
1. YOUR NAME	(last)	(firs	:)	(middle)	2. CONTRACTOR NAME	∃ ⟨as show	n on contr	act/invoice)
ADDRESS	(	(number)	(	street)				LICENSE NO. USED:
(city)		(state)		(ZIP code)	ADDRESS	(number)		(street)
PHONE WHERE YO (area code)	U CAN BE REAC	CHED 8 a.m5 p.m.	·		(city)	(state)		(ZIP code)
HOME PHONE: (are	a code)				PHONE NUMBER			
		er damages on this cor on with this form.	nplaint? \	es No	PERSON DEALT WITH			
<u></u>		FORMATION			<u></u>			
4. OWNER OF C			.•		5. CONSTRUCTION SIT	E ADDRESS: street and number	er .	
ADDRESS:			ZIP:	PHONE	CITY:		ZIP:	PHONE
6. Describe briefl	the work for wh	nich you contracted:						
7. CONTRACT D	ATE:	8. AMOUNT:		9. AMOUNT PAID ON	CONTRACT:	10. DATE WORK STARTED:		11. DATE WORK CEASED
12. WHY DID YOU REGULAR CUS	STOMER	L CONTRACTOR?		DOOR-TO-DOOR			ADVERTISE	MENT (ENCLOSE COPY OF )
REFERRED BY  13. BRIEFLY STAT		AINT		OTHER; EXPLAIN	:		·	
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14.	Is this a project a: Residence  Commercial Building Other
15.	Is this project a: Addition  Repair/Replace  New Construction  New Purchase
16.	Was contract: Written  Oral  New Home Purchase Agreement
17.	Were there any change orders? Yes \( \subseteq \text{No} \subseteq \)  If yes, were they: Written \( \subseteq \text{Oral} \subseteq \text{Both} \subseteq \)
18.	Is your complaint: Abandonment  Workmanship  Other
19.	Building permit obtained by: Contractor  You Do not know Name of building department
20.	Who presented contract? (name): Salesperson
	Contractor
	Do not know
21.	Did the contractor have employees? Yes \( \subseteq \text{No} \subseteq \text{If so, how many?} \)
22.	Were employees, subcontractors, or materialmen paid? Yes  No  Do not know D
23.	Were any liens filed on this job? Yes  No By whom?
24.	What attempts have you made to contact the contractor? Unable to locate Personal contact Telephone Letter (attach copies)
25.	Have you obtained an estimate from another contractor to complete or correct job? Yes No No If yes, provide name, address, phone number of the contractor, and if possible, a copy of the estimate.
	PLEASE SEND COPIES OF ALL PAPERS RELATED TO YOUR COMPLAINT
	ase attach copies of both sides of contracts, cancelled checks, and other pertinent materials. DO NOT SEND ORIGINALS. If copies are available, please explain why:
<b>A</b> .	The Contractors State License Board cannot direct a nonlicensed contractor to complete or correct a project.  C. The Contractors State License Board cannot represen private citizens in court nor collect money for you Please contact an attorney or the small claims
B.	In addition to this complaint you may also file an action in civil court. Please get advice from an attorney or the small claims counselor at your local municipal court on filing such a complaint.
The	e information contained in this form is true, correct, and complete to the best of my knowledge. I will assist in the investigation or in prosecution of the contractor or other parties, and will if necessary, attend hearings and testify to facts.
26	SIGN HERE 27. DATE
	THANK YOU FOR ASSISTING US IN OUR EFFORTS TO RESOLVE YOUR COMPLAINT.